## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10871576

01 41140 40 511 55 54 55										<del>-</del>		
_		CLAIMS A		S FILED - PART I  (Column 1) (Column 2)			SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			71	71				RATE	FEE	٦ ٦	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	<del></del>	OR		<del></del>
TOTAL CHARGEABLE CLAIMS			N.S. m	inus 20=	*			X\$ 9=	<del>                                     </del>	7	XS18=	IV
IN	DEPENDENT (	CLAIMS	7 minus 3 = *					X43=	<u> </u>	OR	<b></b> -	100
М	ULTIPLE DEPE	ENDENT CLAIM I	RESENT					A43=	<del> </del>	OR	X86=	<b> </b>
	f the difference	e in column 1 is	less than zero, enter "0" in column 2				+145=	<u> </u>	OR	+290=	;	
	•	·						TOTAL		OR	TOTAL	181
		(Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	***	<u> </u>	=		X43=		OR	X86=	
9	FINST PRESI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=	
	(9)	(1)					L	TOTAL			TOTAL	
		(Column 1)	<u> </u>	(Colum	n 2)	(Column 3)	A	ODIT. FEE		<b>.</b>	NDDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	R JSLY	PRESENT EXTRA	$\cdot \int$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Σ Ω N	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
AME	Independent	<u>  •                                     </u>	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT C	LAIM			+145=		OR	+290=	
•							L_	TOTAL		_ <b>L</b>	TOTAL	
	(Column 1) (Column 2) (Column						AU	DIT. FEE		I T. A	DDITFEE <b>L</b>	
ENDINEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	T R SLY	PRESENT EXTRA	[	RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		<b>(\$ 9=</b>		OR	X\$18=	
	Independent		Minus	***		=	$\vdash$	X43=		`` <b> </b>	X86=	
1	FIRST PRESE	ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								145=		OR L	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE												
Ti	ne "Highest Numl	ber Previously Paid	For® (Total or I	Independent)	is the h	nighest number f	ound	in the appr	opriate box	in colun	n 1.	ł